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A study to assess the effectiveness of information guide sheet on knowledge regarding impact of mobile phone use on health status among adolescent boys age between 14-18 years in selected schools of rural area of Indore District (M.P.)

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### Abstract

The current study has been undertaken to assess knowledge score regarding Impact of mobile phone use on health status among Adolescent boys age between 14-18 years by Information guide sheet. The research design used for study was pre- experimental in nature. The tool for study was self-structured knowledge questionnaire which consists of 2 Parts-Part- I consisted questions related to Socio-demographic data; PART-II consisted of self-structured knowledge questionnaire to assess knowledge score regarding Impact of mobile phone use on health status among Adolescent boys age between 14-18 years. The data was analyzed by using descriptive & inferential statistical methods. After administration of Information guide sheet, some part of population of Adolescent boys (9, 15.0%) Adolescent boys measured with good (13-18) knowledge had aware about Impact of mobile phone use on health status, major part of population of Adolescent boys (51, 85.0%) Adolescent boys measured with excellent (19-24) knowledge had much aware about Impact of mobile phone use on health status and which highlighted the effectiveness of Information guide sheet in terms of better gain in knowledge.

Keywords: Assess, information guide, knowledge, mobile phone, health

### Introduction

Technology has made our life easy. We have gadgets that save our time and energy, entertain and inform us and play the role of companions, too. These gadgets, like mobile phones, the iPad, etc. are a boon for human beings. On the flip side, though, these gadgets are also the bane of our lives. Not only do these gadgets make us lazy and inactive but they are also harmful to our physical and mental well-being. Take the Smartphone, for example. Everywhere you see, people are glued to their phones, scrolling through social media, and wasting precious hours doing nothing productive. Kids, especially, have become victims of smartphones, and if we don't take steps soon, then these smart gadgets will completely ruin their lives. Do you want to know the harmful effects of mobile phones on students?

### **Objectives**

- To assess the pre-test knowledge of Adolescent boys age between 14-18 years regarding Impact of mobile phone use on health status before implementing Information guide sheet.
- 2. To determine the effectiveness of Information guide sheet on knowledge regarding Impact of mobile phone use on health status by comparing post-test and pretest knowledge score.
- 3. To find out the association between pre-test knowledge score of Adolescent boys age between 14-18 years with selected demographic variables.

### Hypotheses

H<sub>1</sub>: There is a significant difference between mean pre-test and post-test level of knowledge score of Adolescent boys age between 14-18 years regarding Impact of mobile phone use on health status.

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**H2:** There is a significant association between the pre-test knowledge score of Adolescent boys age between 14-18 years regarding Impact of mobile phone use on health status with selected demographic variables.

### Methodology

An evaluative approach was used and research design preexperimental one group pre-test post-test research design was used for the study. The samples consisted of 60 Adolescent boys age between 14-18 years selected by Non probability convenient sampling technique. The setting for the study was selected schools, Indore. Data was gathered with help of demographic variables & administering a self-structured knowledge questionnaire by analyst prior & after Information guide sheet. Post-test was done after seven days of pre-test. Data were analysis using descriptive & inferential statistics

### Results Socio-personal data

Table 1: Frequency and percentage distribution

S. No.	Variables	Frequency	Percentage				
1.	Age						
	14-15 year	13	21.7				
	16-17 year	37	61.7				
	18 years	10	16.7				
2.	Education						
	10 <sup>th</sup>	2	3.3				
	11 <sup>th</sup>	26	43.3				
	12 <sup>th</sup>	28	46.7				
	Diploma & UG	4	6.7				
3	Gender						
	Male	24	40.0				
	Female	36	60.0				
4	T						
	Nuclear	32	53.3				
	Joint	28	46.7				
5	Religion						
	Hindu	26	43.3				
	Muslim	27	45.0				
	Christian	4	6.7				
	Others	3	5.0				

**Regarding age:** This was reported that 13 (21.7%) of the population of Adolescent boys were more frequently belonged to the age between 14-15 years and that followed by the age group of 16-17 years consisted of 37 (61.7%) Adolescent boys. This was also noticed that the higher age group of 18 years consisted of 10 (16.7%) Adolescent boys.

**Regarding education:** Major part (28, 46.7%) of population of Adolescent boys age between 14-18 years found to be with 12<sup>th</sup> level of education, (2, 3.3%) of population of Adolescent boys age between 14-18 years found to be with 10<sup>th</sup> level of education, (26, 43.3%) of population of Adolescent boys age between 14-18 years found to be with 11<sup>th</sup> level of education, (4, 6.7%) of population of Adolescent boys age between 14-18 years found to be with diploma & UG level of education.

**Regarding Gender:** (24, 40.0%) of population of Adolescent boys age between 14-18 years was most commonly male. Rest, 36 (60.0%) Adolescent boys age between 14-18 years

found to be female had also participated in the present study.

**Regarding religion:** Most of the Adolescent boys age between 14-18 years 26 (43.3%) were Hindu, 27 (45.0%) Adolescent boys age between 14-18 years were found Muslim, 4 (6.7%) Adolescent boys age between 14-18 years were found Christian and also 3 (5.0%) Adolescent boys age between 14-18 years were found from other religion.

**Regarding types of family:** The type of family of major part (32, 53.3%) of population of Adolescent boys age between 14-18 years was more frequently nuclear. Further, this was detected that type of family of 28 (46.7%) Adolescent boys age between 14-18 years were joint used to live in joint family.

# Assess the significance difference between pre-test and post-test knowledge

**Table 2:** Comparison of scoring to judge the knowledge among Adolescent boys age between 14-18 years between pre (baseline) and post administration stages (N = 60)

Domomoton	Variable	<b>Scatterings</b>	7 Statistic	P-Value (LOS)	
Parameter	variable	Mean ± SD	Z-Staustic		
Knowledge		10.88±2.50	18.28	p<0.05	
	Post-test	20.10±1.85	16.26		

Table 2 highlights the pre and post administrational assessment of knowledge of Adolescent boys age between 14-18 years about Impact of mobile phone use on health status. However, the difference was analyzed to rule out the improvement in knowledge between day one (baseline) and seventh day post-administration.

Post-administration, the knowledge among Adolescent boys age between 14-18 years about Impact of mobile phone use on health status found to be differed and was significantly improved after administration of Information guide sheet as compared to pre administrational knowledge.

After administration at day seven the average (Mean±Standard Deviation) score to judge the knowledge (10.88±2.50 points) among Adolescent boys age between 14-18 years found to be significantly greater and improved as compared to average score of knowledge (20.10±1.85 points) at baseline stage.

Moreover, the statistical agreement projected that the Adolescent boys age between 14-18 years intervened with reliable Information guide sheet had better and significantly improved knowledge.

Henceforth, the statistical agreement demonstrated that the Information guide sheet preferred as an effective conservative program for improving the knowledge among Adolescent boys age between 14-18 years regarding Impact of mobile phone use on health status.

Furthermore, the alternative hypothesis was accepted and concluded that there were significant differences between pretest and posttest knowledge scoring regarding Impact of mobile phone use on health status among Adolescent boys age between 14-18 years.

The above chi square table says that there is significant association between knowledge score and the selected socio demographic variables as the chi square value is greater than the tabulated value at 0.05 level of significance. Therefore, the  $H_2$  hypothesis was rejected.

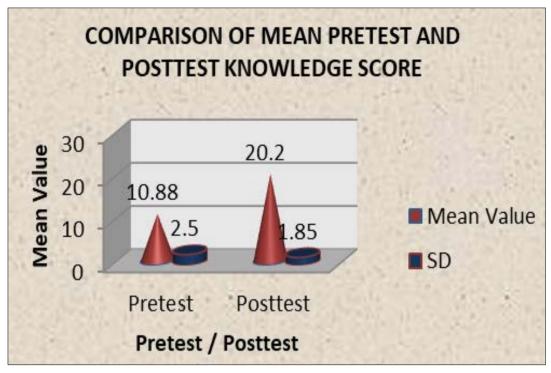


Fig 1: Bar diagram showing the comparison in scoring of knowledge among Adolescent boys age between 14-18 years having before (pretest) and after administration (post-test)

### The association of knowledge of Adolescent boys age between 14-18 years with selected demographic variables

**Table 3:** The association of knowledge regarding Impact of mobile phone use on health status of Adolescent boys age between 14-18 years before administration with selected demographic variables at baseline stage (pretest)

Socio-demographic Variables	Poor	Average	Good	Tot al	DF	Chi-Square Value
1 Age						
14-15 year	0	11	2	13	2	1.21
16-17 year	0	26	11	37		
18 years	0	8	2	10		
2. Education						
10 <sup>th</sup>	0	2	0	2	3	2.46
11 <sup>th</sup>	0	18	8	26		
12 <sup>th</sup>	0	21	7	28		
Diploma & UG	0	4	0	4		
3. Gender						
Male	0	16	8	24	1	1.48
Female	0	29	7	36		
4. Types of family						
Nuclear	0	26	6	32	1	1.42
Joint	0	19	9	28		
5. Religion						
Hindu	0	19	7	26	3	1.50
Muslim	0	20	7	27		
Christian	0	4	0	4		
Others	0	2	1	3		

### Discussion

- This was reported that 13 (21.7%) of the population of Adolescent boys were more frequently belonged to the age between 21-25 years and that followed by the age group of 26-30 years consisted of 37 (61.7%) Adolescent boys. This was also noticed that the higher age group of more than 30 years consisted of 10 (16.7%) Adolescent boys.
- This was reported that Major part (28, 46.7%) of population of Adolescent boys found to be with 12<sup>th</sup> level of education, (2, 3.3%) of population of Adolescent boys found to be with 10<sup>th</sup> level of
- education, (26, 43.3%) of population of Adolescent boys found to be with 11<sup>th</sup> level of education, (4, 6.7%) of population of Adolescent boys found to be with diploma & UG level of education,
- This was reported that (24, 40.0%) of population of Adolescent boys was most commonly male. Rest, 36 (60.0%) Adolescent boys found to be female had also participated in the present study.
- This was reported that Most of the Adolescent boys 26 (43.3%) were Hindu, 27 (45.0%) Adolescent boys were found Muslim, 4 (6.7%) Adolescent boys were found Christian and also 3 (5.0%) Adolescent boys were

found from other religion.

- This was reported that the type of family of major part (32, 53.3%) of population of Adolescent boys was more frequently nuclear. Further, this was detected that type of family of 28 (46.7%) Adolescent boys were joint used to live in joint family.
- Post-administration, the knowledge among Adolescent boys about Impact of mobile phone use on health status found to be differed and was significantly improved after administration of Information guide sheet as compared to pre administrational knowledge.
- After administration at day seven the average (Mean±Standard Deviation) score to judge the knowledge (10.88±2.50 points) among Adolescent boys found to be significantly greater and improved as compared to average score of knowledge (20.10±1.85 points) at baseline stage.
- Moreover, the statistical agreement projected that the Adolescent boys intervened with reliable Information guide sheet had better and significantly improved knowledge.
- The pre-existed knowledge of Adolescent boys was found at average level which can be easily measured by analyzing the pre-test scoring. However, major part of the population of Adolescent boys noted with average knowledge about Impact of mobile phone use on health status at baseline stage.
- Before administration of Information guide sheet exactly 45 (75.0%) Adolescent boys observed with average (7-12) knowledge about Impact of mobile phone use on health status. Further, analysis indicated that population of Adolescent boys (15, 25.0%) identified with good (13-18) knowledge about Impact of mobile phone use on health status before administration of Information guide sheet.
- However, post administration none (0.0%) of the Adolescent boys identified with poor and average knowledge about Impact of mobile phone use on health status. This was also noted that 0 (0.0%) Adolescent boys had obtained with poor (0-6) and average (7-12) knowledge about Impact of mobile phone use on health status.
- After administration of Information guide sheet, some part of population of Adolescent boys (9, 15.0%) Adolescent boys measured with good (13-18) knowledge had aware about Impact of mobile phone use on health status, major part of population of Adolescent boys (51, 85.0%) Adolescent boys measured with excellent (19-24) knowledge had much aware about Impact of mobile phone use on health status and which highlighted the effectiveness of Information guide sheet in terms of better gain in knowledge.
- The chi square says that there is significant association between knowledge score and the selected socio demographic variables as the chi square value is greater than the tabulated value at 0.05 level of significance. Therefore, the H2 hypothesis was rejected.

### Conclusion

The study concluded that after administration of Information guide sheet, the knowledge assessment among Adolescent boys had indicated that the improvements in knowledge of Adolescent boys about Impact of mobile phone use on health status found at large at post administration stage as compared to baseline stage.

Conflict of Interest: Not available

## Financial Support: Not available

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### **How to Cite This Article**

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